



**Arizona Department of Education
Supplemental Educational Services Agreement
SY 2005-2006**

The tutoring services are being offered to this student to increase his/her academic achievement. These services are offered outside of the regular school day and may include academic assistance such as tutoring, remediation and other educational interventions, consistent with the content and instruction used by the LEA and are aligned with Arizona State Academic Standards.

I. GENERAL INFORMATION

Student	School	LEA (District or Charter School)		SAIS number
Student Address		City	Zip Code	Student Phone Number
Parent/Guardian/Educational Surrogate				Telephone (if different than student's)
Parent/Guardian/Educational Surrogate Address if different than student's		City	Zip Code	
Tutoring Provider (private provider or school name)				
Provider Address		City	State	

**II. PARENT/GUARDIAN/ EDUCATIONAL
SURROGATE RESPONSIBILITIES**

The parent/guardian/educational surrogate:

1. **has assured that the child will be present for services;**
2. has communicated with the provider about any special needs of the child;
3. will participate in at least one meeting with the provider;
4. will review progress reports with the child.

**III. PARENT/GUARDIAN/EDUCATIONAL SURROGATE,
LEA, and PROVIDER SHARED RESPONSIBILITIES**

1. INDIVIDUAL STUDENT GOALS

Parent will agree to release individual student assessment data for an evaluation of the student's academic achievement so that the LEA, the Provider, and parent/guardian/educational surrogate will set the following goals for the student. The Provider will agree to not disclose the names of the students being tutored.

- *Insert description, for example, specific increases in scores on statewide academic assessments. Include intermediate, as well as final goals.*
- *The Provider shall make no changes in any student's goals without the written consent of the LEA and the child's parent. If student is disabled, state how the goals fit with the student's individualized education program (IEP) under Section 6 15(d) of the Individuals with Disabilities Education Act.*

2. TIMELINE FOR IMPROVING ACHIEVEMENT

LEA, Provider, and parent/guardian/educational surrogate have set the following timeline for improving the student's achievement:

- *Insert timeline that includes dates for achieving intermediate and final goals for student. If student is disabled, state how the timeline fits with the student's IEP.*

3. TRANSPORTATION

Transportation will be provided by the (Check One): ☐ Parent ☐ Provider ☐ LEA
(The school district is not required to pay for transportation.)

4. CANCELLATION OF AGREEMENT

The parent/guardian/educational surrogate or the provider may cancel this agreement if the student fails to attend and participate in sessions as agreed to, the provider fail to provide services as agreed to in the contract, or the provider is removed from the state-approved list.

IV. PROVIDER RESPONSIBILITIES

1. PERFORMANCE MEASURES FOR MEETING GOALS

Provider will measure the student's progress in meeting the goals stated above as follows:

- *Insert description; for example, include pre-post assessments or other tests based on statewide academic assessments, performance on assignments, etc. If student is disabled, state how the performance measures fit with the student's IEP.*

2. DESCRIPTION OF SERVICES

Provider will give the student the following tutoring services at the following location(s), dates, and times:

- *Insert general description, for example, individualized tutoring, small classes, etc., along with locations, dates, and times.*

3. COMMUNICATION WITH PARENTS AND LEA

Provider will inform parent/guardian/educational surrogate and LEA staff about the student's progress:

- *Insert description, for example, "Provider will inform parent/guardian/educational surrogate and LEA staff a written report describing the child's progress, including benchmark data on a (daily, weekly or monthly basis)". If requested by District or parent, Provider shall give these reports in the following languages: insert languages.*

V. PAYMENT





Payment to the Provider:

The LEA agrees to pay the provider the amount indicated per child for each session of instruction provided, up to a maximum payment allowed by law.

Payment PPA (Per Pupil Allocation)	SES	
Location of Services (Services not to be delivered in a provider's private residence):	City	Contact phone number
Beginning Tutoring Date	End Tutoring Date	Total Number of Sessions
Other information:		

VI. SIGNATURES

We hereby certify that we have read and understood this Tutoring Services Contract Agreement:

Signature of LEA Official 	Printed Name of LEA Official	Date Signed
Signature of Provider 	Printed Name of Provider	Date Signed
Signature of Parent/Guardian/Educational Surrogate 	Printed Name of Parent/Guardian/Educational Surrogate	Date Signed
Signature of Student (as appropriate) 	Printed Name of Student	Date Signed